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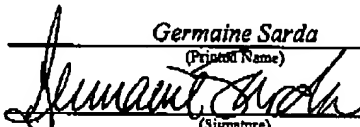
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Atty. Dkt. No. 044499-0108

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Junichiro YAMADA et al.
Title: PERSONAL IDENTIFICATION
DEVICE AND METHOD
Appl. No.: 09/524,693
Filing Date: 03/14/2000
Examiner: S. Chawan
Art Unit: 2625

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. <div style="text-align: center;"><u>Germaine Sarda</u> (Printed Name)  (Signature) <u>July 2, 2004</u> (Date of Deposit)</div>
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AMENDMENT AND REPLY UNDER 37 CFR 1.116

Mail Stop AF
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

This communication is responsive to the Final Office Action dated May 5, 2004,
concerning the above-referenced patent application.

Amendments to the Claims are reflected in the listing of claims which begins on page 2
of this document.

Remarks/Arguments begin on page 6 of this document.

Please amend the application as follows:

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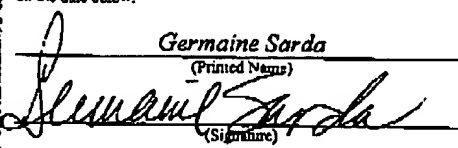
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	Germaine Sarda (Printed Name)
	(Signature)
	July 2, 2004 (Date of Deposit)

AMENDMENT TRANSMITTAL

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed please find:

☒ Amendment After Final (9 pages).

☒ The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	10	-	20	=	0	x	\$18.00	=	\$0.00
Independent Claims:	4	-	3	=	1	x	\$86.00	=	\$86.00
First presentation of any Multiple Dependent Claims:						+	\$290.00	=	\$0.00
CLAIMS FEE TOTAL								=	\$86.00

Atty. Dkt. No. 044499-0108

- [X] Please charge Deposit Account No. 19-0741 in the amount of \$86.00. A duplicate copy of this transmittal is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date July 2, 2004

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By 

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Attorney for Applicant
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From : Sanjeev Dhand**Date :** July 2, 2004**Client/Matter No :** 044499-0108**User ID No :** 0130**MESSAGE:****Re:** U.S. Patent Application No. 09/524,693
Our Ref.: 044499-0108

Attached please find:

- Transmittal (2 pgs.); Duplicate Copy Attached
- Amendment and Reply Under 37 C.F.R. § 1.116
- Authorization to charge Deposit Acct. No. 50-0872 in the amount of \$86.00.

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